Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Melvin First name O. Middle name Ott Last name and Suffix (Sr., Jr., II, III)	_ _ _	Rebecca First name A. Middle name Ott Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.			Rebecca A. Smith
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2770		xxx-xx-1715

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.	EIN	EIN
5.	Where you live	424 Pearl St.	If Debtor 2 lives at a different address:
		Sandusky, OH 44870	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Erie County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1	Melvin O. Ott
Debtor 2	Rebecca A. Ott

Case number (if known)

(Bankruptcy Code you are choosing to file under	☐ Chap ☐ Chap ☐ Chap ☐ Chap	oter 11				
8. H		☐ Chap	oter 11				
8. H			oter 12				
3. I		■ Chap					
3. H			oter 13				
3. I							
	How you will pay the fee	ab or	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				
			•		If you choose this op	otion, sign and attach the Application for Individuals to Pay	
			•	e in Installments (Official I	•		
						tion only if you are filing for Chapter 7. By law, a judge may your income is less than 150% of the official poverty line th	
		ар	plies to yo	ır family size and you are	unable to pay the fee	e in installments). If you choose this option, you must fill out	
		the	e Applicati	n to Have the Chapter / I	-iling Fee Waived (O	fficial Form 103B) and file it with your petition.	
). H	Have you filed for						
k	bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.	District		NA //	Occupant of	
			District		When	Case number	
			District		When When	Case number	
			District		when	Case number	
	Are any bankruptcy cases pending or being	■ No					
f r V	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1. [Do you rent your	= N.	Go to	ne 12.			
	residence?	■ No.			viction judament agai	inet you?	
		☐ Yes.	Has y	ur landlord obtained an ev	nction judgment agai	nst you?	
					nent About an Evictio	on Judgment Against You (Form 101A) and file it as part of	

	tor 1 Melvin O. Ott tor 2 Rebecca A. Ott				Case number (# known)
	NODOGGA AL GRE				
Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to I	^o art 4.	
		☐ Yes.	Name	and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, State	e & ZIP Code
	it to this petition.		Check	the appropriate box	to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. §	proceed you are c cash-flow	ou are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing ceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of oper h-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 1116(1)(B). I am not filing under Chapter 11.		can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, see tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	ing under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Part	Report if You Own or	Have Any	/ Hazardoi	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and	□ 1 €3.	What is the	he hazard?	
	identifiable hazard to public health or safety?				
	Or do you own any property that needs immediate attention? If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	

Number, Street, City, State & Zip Code

Debtor 1 Melvin O. Ott Debtor 2 Rebecca A. Ott

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Debtor 1 Debtor 2	Melvin O. Ott Rebecca A. Ott	Case number (if known)
Part 6:	Answer These Questions for Reporting Purposes	

Par	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busine money for a business or investme					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe the	hat are not consumer de	ebts or bus	usiness debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	o to line 18.			_	
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab			t property is excluded and administrative expense ditors?	S	
	administrative expenses are paid that funds will		□ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$10 0 \$10,000,001 - \$50 \$50,000,001 - \$10 \$100,000,001 - \$5) million)0 million			
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$10 of \$10,000,001 - \$50 of \$50,000,001 - \$50 of \$100,000,001 - \$50 of \$100,000,0001 -) million)0 million			
Par	7: Sign Below							
For	you	I have ex	amined this petition, and I declare	under penalty of perjury	that the i	information provided is true and correct.		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
			torney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ent, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupt and 3571	cy case can result in fines up to \$2d I.	50,000, or imprisonmen	nt for up to	oney or property by fraud in connection with a o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519	٠,	
		/s/ Melvin	vin O. Ott		Rebecca Secca A			
			e of Debtor 1		Rebecca A. Ott Signature of Debtor 2			
		Executed	d on September 17, 2023 MM / DD / YYYY	Exec	cuted on	September 17, 2023		
						. –		

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Debtor 1	Melvin O. Ott
Debtor 2	Rebecca A. Ott

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Nathan	ı M. Nishiki	Date	September 17, 2023
Signature of	f Attorney for Debtor		MM / DD / YYYY
Nathan M.	. Nishiki 0078775		
Printed name			
Rauser &	Associates Legal Clinic Co., L.P.	A.	
Firm name			
316 N. Mic	chigan St.		
Suite 420			
Toledo, O	H 43604		
Number, Street	City, State & ZIP Code		
Contact phone	419-241-4900	Email address	nnishiki@ohiolegalclinic.com
0078775 C	ЭН		
Bar number & S	State		

Fill ir	this information to identify you	r case:			
Debto					
Debit	First Name	Middle Name	Last Name		
Debto					
(Spous	e if, filing) First Name	Middle Name	Last Name		
Unite	States Bankruptcy Court for the:	NORTHERN DISTRICT OF	F OHIO		
Case	number				
(if knov				☐ Chec	k if this is an
L				amer	nded filing
∩ffi	cial Form 106Sum				
		and Liahilities and	Certain Statistical Information		12/15
			e filing together, both are equally responsible	or supplyi	
inforn	ation. Fill out all of your scheduriginal forms, you must fill out a	ıles first; then complete the i	nformation on this form. If you are filing amen		
					assets of what you own
	Nahadala A/D. Buananta (O///)	F (004/P)			,
1.	Schedule A/B: Property (Official a. Copy line 55, Total real estate,	Form 106A/B) from Schedule A/B		\$	60,000.00
				\$	6,699.00
	c. Copy line 63, Total of all prope	rty on Schedule A/B		\$	66,699.00
Dort 1	Summarize Your Liabilities	•			,
Part 2	Summarize Your Liabilities				
					iabilities nt you owe
	Schedule D: Creditors Who Have 2a. Copy the total you listed in Col		official Form 106D) bottom of the last page of Part 1 of Schedule D	\$	50,000.00
3.	Schedule E/F: Creditors Who Have	e Unsecured Claims (Official F	orm 106E/E)		
			from line 6e of Schedule E/F	\$	0.00
	b. Copy the total claims from Par	t 2 (nonpriority unsecured clair	ms) from line 6j of Schedule E/F	\$	2,014.00
				_	,
			Your total liabilities	\$	52,014.00
Part 3	Summarize Your Income an	nd Expenses			
		•			
	Schedule I: Your Income (Official F Copy your combined monthly inco			\$	4,040.00
	Schedule J: Your Expenses (Offici			\$	2,808.66
Part 4		or Administrative and Statisti			
	Are you filing for bankruptcy un No. You have nothing to repo	•	ck this box and submit this form to the court with y	our other so	shadulas
	_ 140. For have nothing to tepo	at on this part of the form. Offer	on the box and submit this form to the court with y	741 UHICI SC	noudios.
-	Yes				
7.	Vhat kind of debt do you have?				
			ots are those "incurred by an individual primarily foor statistical purposes. 28 U.S.C. § 159.	r a persona	I, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

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page 1 of 2

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,300.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

			is filing:			
F	Melvin O. Ott					
Debtor 2	irst Name Rebecca A. Ott	Middle	Name Last Name			
· · · · · · · · · · · · · · · · · · ·	irst Name	Middle	Name Last Name			
Jnited States Bankru	ptcy Court for the:	NORTHER	N DISTRICT OF OHIO			
Case number						☐ Check if this is ar amended filing
Official Form	106A/R					-
Schedule A	A/B: Prop		an asset only once. If an asset fits in more than			12/15
	any legal or equitab	<u>. </u>	her Real Estate You Own or Have an Interest In ny residence, building, land, or similar property			
.1 424 Pearl St.	424 Pearl St. Street address, if available, or other description		What is the property? Check all that apply			
Street address, if avail	lable, or other description	n	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secured	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
			Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount Creditors V Current va	of any secured Who Have Clain	d claims on Schedule D: ns Secured by Property. Current value of the
Street address, if available Sandusky City		870-0000 ZIP Code	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount Creditors V Current va entire prop	of any secured Who Have Clain lue of the perty?	d claims on Schedule D: ns Secured by Property.
Sandusky	OH 44	870-0000	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va entire prop	of any secured the Have Clain lue of the perty? 60,000.00 he nature of years.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
Sandusky	OH 44	870-0000	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current va entire prop	of any secured who Have Clain lue of the perty? 60,000.00 he nature of your simple, tenael, if known.	current value of the portion you own? \$60,000.00 curr ownership interest

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb		lelvin O. Ot lebecca A.			Case number (if known)
3. C a	ars, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles		
п	No					
_	Yes					
	100					
3.1	Make:	Pontiac		Who has an interest in the property? Check one		ecured claims or exemptions. Put
	Model:	Grand Ar	n	Debtor 1 only		ny secured claims on Schedule D: lave Claims Secured by Property.
	Year:	2002		■ Debtor 2 only	Current value o	
	Approxir	nate mileage:	150,000	Debtor 1 and Debtor 2 only	entire property	
	Other in	formation:		☐ At least one of the debtors and another		
					\$50	00.00 \$500.00
				Li Check if this is community property (see instructions)	430	,0.00
				(455.454.545)		
5 A .p	ages you	have attach		rn for all of your entries from Part 2, including that number here		\$500.00
Do y	ou own o	or have any I	egal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	<i>xamples:</i> No	goods and f Major appliar	furnishings nces, furniture, linens	, china, kitchenware		
			Misc. Househol	d Goods		A
			Debtor's Posse	ssion		\$1,500.00
E		Televisions a including cell		eo, stereo, and digital equipment; computers, pr nedia players, games	rinters, scanners; music	collections; electronic devices
Ε	xamples:		figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	r art objects; stamp, coi	n, or baseball card collections;
		scribe				
E	xamples:	for sports as Sports, photo musical instru	graphic, exercise, ar	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	s and kayaks; carpentry tools;
	l No l Yes. De	escribe				
_		: Pistols, rifles	s, shotguns, ammuni	tion, and related equipment		
	No					
	Yes. De			Cohodula A/Da Duarranta		<u></u>
Offici	al Form 1	U6A/B		Schedule A/B: Property		page 2

Debtor 1 Debtor 2	Melvin O. Ot Rebecca A.				Case number (if known)	
□ No		Clothe		signer wear, shoes, accessories		\$300.00
□ No		welry, cos	tume jewelry, enga	igement rings, wedding rings, heirloom	n jewelry, watches, gems, g	old, silver
		Jeweli Debto	y 's Possession			\$50.00
Exam ■ No □ Yes 14. Any o ■ No		d househ	old items you did	not already list, including any healt	th aids you did not list	
15. Add		of all of y	our entries from P	Part 3, including any entries for page	es you have attached	\$1,850.00
	escribe Your Finan wn or have any l			n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No			-	ome, in a safe deposit box, and on har	Cash on Hand Debtor's	
<i>Exan</i> □ No				ounts; certificates of deposit; shares in s with the same institution, list each. Institution name: U.S. Bank Checking Account	Possession n credit unions, brokerage h	<u>-</u>
		17.1.		Fifth Third Bank Savings Account		\$0.00

Debtor 1 Melvin O. Ott
Debtor 2 Rebecca A. Ott

Case number (if known)

Fifth Third Bank Checking Checking Account

\$344.00

claims or exemptions.

_		
18	8. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts	
	■ No	
	☐ Yes Institution or issuer name:	
19	 Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an int joint venture 	erest in an LLC, partnership, and
	■ No	
	☐ Yes. Give specific information about them	
20	 Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. 	
	☐ Yes. Give specific information about them Issuer name:	
21.	. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sha	uring plans
	■ No □ Yes. List each account separately.	
	Type of account: Institution name:	
22	2. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications con	mpanies, or others
	■ No □ Yes Institution name or individual:	
23	B. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
	■ No	
	Yes Issuer name and description.	
24.	I. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	n program.
	■ No □ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 52	21(c):
25	5. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers No	s exercisable for your benefit
	☐ Yes. Give specific information about them	
26	6. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	■ No □ Yes. Give specific information about them	
07		
27	 Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional li No 	censes
	☐ Yes. Give specific information about them	
M	loney or property owed to you?	Current value of the portion you own? Do not deduct secured

	ebtor 1 ebtor 2	Melvin O. Ott Rebecca A. Ott	Case number (if known)	
28.	Tax ref	funds owed to you		
	■ No			
	⊔ Yes.	Give specific information about them, including whether you alr	eady filed the returns and the tax years	
29.		support bles: Past due or lump sum alimony, spousal support, child supp	port, maintenance, divorce settlement, property	settlement
	■ No			
	☐ Yes.	Give specific information		
30.	Exam _l	amounts someone owes you oles: Unpaid wages, disability insurance payments, disability be benefits; unpaid loans you made to someone else	nefits, sick pay, vacation pay, workers' compen	sation, Social Security
	■ No □ Yes.	Give specific information		
31.		ets in insurance policies bles: Health, disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's insuran	се
		Name the insurance company of each policy and list its value.		
	— 103.	Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	terest in property that is due you from someone who has d are the beneficiary of a living trust, expect proceeds from a life i one has died.		eive property because
	■ No			
	☐ Yes.	Give specific information		
33.	_Examp	against third parties, whether or not you have filed a lawsoles: Accidents, employment disputes, insurance claims, or righ		
	■ No	Describe each claim		
34.	Other o	contingent and unliquidated claims of every nature, includi	ng counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
35.	Any fin ■ No	nancial assets you did not already list		
		Give specific information		
36		he dollar value of all of your entries from Part 4, including art 4. Write that number here		\$4,349.00
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an Interes	t In. List any real estate in Part 1.	
37.	Do you	own or have any legal or equitable interest in any business-related	property?	
ı	No. Go	to Part 6.		
I	☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Or ou own or have an interest in farmland, list it in Part 1.	wn or Have an Interest In.	
46.	_ `	own or have any legal or equitable interest in any farm- or	commercial fishing-related property?	
	_	. Go to line 47.		

Debto			Case number (if known)	
Part 7	Describe All Property You Own or Have an Interest in That You I			
	you have other property of any kind you did not already list? xamples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$60,000.00
56. F	Part 2: Total vehicles, line 5	\$500.00	_	
57. F	Part 3: Total personal and household items, line 15	\$1,850.00		
58. F	Part 4: Total financial assets, line 36	\$4,349.00		
59. F	Part 5: Total business-related property, line 45	\$0.00		
60. F	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	Part 7: Total other property not listed, line 54 +	\$0.00		
62. 1	Total personal property. Add lines 56 through 61	\$6,699.00	Copy personal property total	\$6,699.00
63. 1	Total of all property on Schedule A/B. Add line 55 + line 62			\$66,699.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Melvin O. Ott			
	First Name	Middle Name	Last Name	
Debtor 2	Rebecca A. Ott			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO	
Case number				- 0
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
424 Pearl St. Sandusky, OH 44870 Erie County	\$60,000.00		\$322,750.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(/-)(-)	
2002 Pontiac Grand Am 150,000 miles	\$500.00		\$4,450.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Misc. Household Goods Debtor's Possession	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	· // //	
Clothes Debtor's Possession	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
Jewelry Debtor's Possession	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(/ 1)(4)(8)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor 1 Melvin O. Ott
Debtor 2 Rebecca A. Ott

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.			
Cash on Hand Debtor's Possession	\$5.00		\$5.00	Ohio Rev. Code Ann. §	
Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(3)	
Checking: U.S. Bank Checking Account	\$4,000.00		\$1,095.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(O)	
Checking: U.S. Bank Checking Account	\$4,000.00		\$2,905.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		

3.	Are you	u claiming a	homestead	l exemption of	of more thai	า \$189,050?
----	---------	--------------	-----------	----------------	--------------	--------------

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - No
 - ☐ Yes

гш ш	this information to iden	tify your	case:				
Debto	or 1 Melvin O.	Ott					
	First Name	_	Middle Name	Last Name		-	
Debto	or 2 e if, filing) Rebecca First Name	A. Ott	Middle Name	Last Name		-	
(Spous	e ii, iiiiiig) Fiist Naiile						
Unite	d States Bankruptcy Court	for the:	NORTHERN DISTRICT OF OH	10		-	
Case	number						
(if know	vn)					☐ Chec	k if this is an
						amer	nded filing
Offic	cial Form 106D						
		tors \	Who Have Claims S	Sacurac	hy Proport	N/	12/15
<u> </u>	iedule D. Credi	1015	WITO Flave Claims	Jecui ec	by Propert	<u>y</u>	12/13
is need			wo married people are filing togethe t, number the entries, and attach it t				
1. Do a	ny creditors have claims se	cured by y	our property?				
	No. Check this box and s	ubmit this	form to the court with your other	schedules. Yo	ou have nothing else t	to report on this form.	
	Yes. Fill in all of the infor	mation be	low.				
Part 1	1: List All Secured Cla	ims					
			re than one secured claim, list the cred	ditor senarately	Column A	Column B	Column C
for eac	ch claim. If more than one cre	ditor has a	particular claim, list the other creditors l order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	U.S. Bank		Describe the property that secures the	he claim:	\$50,000.00	\$60,000.00	\$0.00
	Creditor's Name	I	124 Pearl St. Sandusky, OH 4 Erie County	44870			
	P. O. Box 790408 Saint Louis, MO 63179-0408	a	As of the date you file, the claim is: (Check all that			
-	Number, Street, City, State & Zip C		☐ Contingent ☐ Unliquidated				
	rtamber, etreet, etty, etate a zip e	_	Disputed				
	owes the debt? Check one.		Nature of lien. Check all that apply.				
Who	ebtor 1 only	I	An agreement you made (such as n	nortgage or sec	eured		
☐ De	ebtor 2 only		car loan)	1			
De De			☐ Statutory lien (such as tax lien, med	nanic's lien)			
☐ De ☐ De ☐ De	ebtor 1 and Debtor 2 only		Judgment lien from a lawsuit	First Mortg	ane		
□ De □ De □ De □ At	least one of the debtors and a	nother I	0.1 (1.1 1.1 1.1 1.1 1.1 1.1	i ii st mortg	age		
□ De □ De □ De □ At □ Ch	· · · · · · · · · · · · · · · · · · ·	nother I	Other (including a right to offset)				
☐ De ☐ De ☐ De ☐ At ☐ Ch	least one of the debtors and a	nother [Other (including a right to offset) Last 4 digits of account numbers.	per			
De D	least one of the debtors and a neck if this claim relates to a community debt debt was incurred		Last 4 digits of account numb		\$50.00	20.00	
De De De De Co	least one of the debtors and a neck if this claim relates to a community debt debt was incurred	ries in Col	Last 4 digits of account numb		\$50,00		
De De De Date c	least one of the debtors and a neck if this claim relates to a community debt debt was incurred	ries in Col	Last 4 digits of account numb		\$50,00 \$50,00		

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in this inf	ormation to identify your o	ase:			
Debtor 1	Melvin O. Ott				
	First Name	Middle Name	Last Name		
Debtor 2	Rebecca A. Ott				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)					Check if this is an
					amended filing
O#:-:-! =	400E/E				
	orm 106E/F		and I Ole Lead		4045
	E/F: Creditors W		Ured Claims PRIORITY claims and Part 2 for creditors v		12/15
left. Attach the name and case		e. If you have no information	pace is needed, copy the Part you need, f on to report in a Part, do not file that Part.		
1. Do any cre	ditors have priority unsecured	d claims against you?			
■ No. Go	to Part 2.				
☐ Yes.					
	t All of Your NONPRIORIT				
	editors have nonpriority unsec				
☐ No. You	ı have nothing to report in this pa	art. Submit this form to the co	ourt with your other schedules.		
unsecured	claim, list the creditor separately	for each claim. For each cla	der of the creditor who holds each claim. im listed, identify what type of claim it is. Do 3.If you have more than three nonpriority uns	not list claims already in	cluded in Part 1. If more
T uit Z.					Total claim
	ily Health Services of Enterity Creditor's Name	rie Co Last 4 digit	s of account number		\$62.00
1912	Hayes Ave lusky, OH 44870	When was t	he debt incurred?		_
	er Street City State Zip Code	As of the da	ate you file, the claim is: Check all that app	ly	
	ncurred the debt? Check one.				
	btor 1 only	☐ Continge	ent		
☐ De	btor 2 only	☐ Unliquida	ated		
■ De	btor 1 and Debtor 2 only	☐ Disputed			
☐ At	least one of the debtors and ano	uici	NPRIORITY unsecured claim:		
	eck if this claim is for a comn				
debt Is the	claim subject to offset?	☐ Obligation report as pri	ns arising out of a separation agreement or ority claims	divorce that you did not	
■ No		☐ Debts to	pension or profit-sharing plans, and other si	milar debts	
☐ Ye	S	Other S	_{pecify} medical		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 5

	2 Rebecca A. Ott	Case number (if known)	
4.2	Firelands Health Services	Last 4 digits of account number	\$355.00
	Nonpriority Creditor's Name PO Box 2338 Sandusky, OH 44870	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.3	One Main Financial	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 5215 Monroe St.	When was the debt incurred?	
	Suite 12		
	Toledo, OH 43623	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify loan	
4.4	Parkview Community	Last 4 digits of account number	\$410.00
	Nonpriority Creditor's Name 3800 Boardwalk Blvd Sandusky, OH 44870	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify loan?	

Retina Associates of Cleveland	Last 4 digits of account number	\$39.0
Nonpriority Creditor's Name 24075 Commerce Park Beachwood, OH 44122-5846	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify medical	
Revenue Group	Last 4 digits of account number	\$174.00
Nonpriority Creditor's Name 3711 Chester Ave	When was the debt incurred?	
Cleveland, OH 44114	when was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify collections	
Stoneberry	Last 4 digits of account number	\$354.00
Nonpriority Creditor's Name PO Box 2823 Monroe, WI 53566-8023	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	and year and a substitution of the substitutio	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify credit	

Debtor 1 Melvin O. Ott Debtor 2 Rebecca A. Ott Case number (if known) 4.8 Tate & Kirlin Associates Inc Last 4 digits of account number \$593.00 Nonpriority Creditor's Name 4800 Street Rd When was the debt incurred? #170 Feasterville Trevose, PA 19053 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collections ☐ Yes \$27.00 4.9 **University Hospital** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 772038 Detroit, MI 48277-2038 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ■ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes medical Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Domestic support obligations** 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 0.00

claims from Part 2 6g.

Official Form 106 E/F

Total

Student loans

you did not report as priority claims

Schedule E/F: Creditors Who Have Unsecured Claims

Obligations arising out of a separation agreement or divorce that

Page 4 of 5

Total Claim

0.00

0.00

6f.

6g.

Debtor 1 Melvin O. Ott Debtor 2 Rebecca A. Ott

Case number (if known)

- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

6h.	\$ 0.00
6i.	\$ 2,014.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Fill in this inform	nation to identify your	case:			
Debtor 1	Melvin O. Ott				
	First Name	Middle Name	Last Name		
Debtor 2	Rebecca A. Ott				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldic	Zii Gode	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fill in this	information to identify your	case:			
Debtor 1	Melvin O. Ott				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Rebecca A. Ott First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case numb	ber				
(if known)					Check if this is an amended filing
	I Form 106H	obtors			40/45
<u>Scnea</u>	ule H: Your Cod	eptors			12/15
No Yes 2. With Arizona No. Yes 3. In Column	hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. b. Did your spouse, former spouumn 1, list all of your codebt	lived in a community p Nevada, New Mexico, Pu use, or legal equivalent liv ors. Do not include you	roperty state or territor uerto Rico, Texas, Wash e with you at the time?	y? (Community property ington, and Wisconsin.)	with you. List the person shown
Form out Co	106Ď), Schedule E/F (Official olumn 2.			6G). Use Schedule D, S	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Check all schedules	ditor to whom you owe the debt strain that apply:
3.1				☐ Schedule D, line	
	Name			_ ☐ Schedule E/F, lir	
				☐ Schedule G, line	
	Number Street	•	710.0	_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			_ ☐ Schedule E/F, lir	
				☐ Schedule G, line	
	Number Street	Otata	710.0	_	
(City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill	in this information to identify your	case:							
Del	otor 1 Melvin O. 0	Ott							
	otor 2 Rebecca A	. Ott			_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF OHIO						
	se number nown)		-			Check if this is An amendo A supplem	ed filing ent showir	0	
0	fficial Form 106I							ollowing date:	
_	chedule I: Your Inc	rome				MM / DD/ `	/YYY		12/15
sup spo atta	as complete and accurate as poplying correct information. If youse. If you are separated and you have separated sheet to this form the complex to the comple	u are married and not fili our spouse is not filing w . On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i ide infori	s liv nati	ing with you, incl on about your sp	ude infor	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor :	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed			□ Empl	•		
	information about additional employers.		■ Not employed				mployed		
	Include part-time, seasonal, or	Occupation	Unemployed			Unemp	loyed		
	self-employed work.	Employer's name							
	Occupation may include studen or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About M	onthly Income							
spoo If yo	mate monthly income as of the use unless you are separated. u or your non-filing spouse have respace, attach a separate sheet	date you file this form. If	,	·		oyers for that perso	on on the l	ines below. If y	· ·
						For Debtor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00	\$	0.00	

Case number (if known)

					For Debtor 1			or Debtor 2 on-filing spo		
	Copy	y line 4 here	4.		\$ 0	.00	\$		0.00	
_	1:-4									
5.		all payroll deductions:	_		•		•			
	5a.	Tax, Medicare, and Social Security deductions	5a.			.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.			.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.			.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.		: 	.00	\$ \$		0.00	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.			.00	Ф \$		0.00	
	5g.	Union dues	5g.		·	.00	\$		0.00	
	5h.	Other deductions. Specify:	5h		·	.00 .00 +	- :		0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5q+5h.	— 6.		· — •	.00	\$		0.00	
7.		rulate total monthly take-home pay. Subtract line 6 from line 4.	7.		· — •	.00	\$		0.00	
		• • • • • • • • • • • • • • • • • • • •	٧.		Φ	.00	φ		0.00	
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ 0	.00	\$		0.00	
	8b.	Interest and dividends	8b.		·	.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				.00	\$		0.00	
	8d.	Unemployment compensation	8d.		·	.00	\$		0.00	
	8e.	Social Security	8e.		\$ 1,800		\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$ 0	.00	\$		0.00	
	8g.	Pension or retirement income	 8g.		\$ 1,300	.00	\$		0.00	
	8h.	Other monthly income. Specify:	8h	+	\$ 0	.00	⊦ \$		0.00	
				Г						٦
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,100	.00	\$	9	40.00	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		3,100.00	+ \$		940.00 =	\$	4,040.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	0,100.00	•			· —	1,0 10100
11.	State Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	deper				-			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certains						t 12. \$	ombin	
12	Do v	ou expect an increase or decrease within the year after you file this form	2					me	onthly	income
١٥.	Бо у ■	No.								
	_	Yes. Explain:								
	ш	. 55. = 1,5.5111								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Melvin O. Ot	+			Che	ck if this is:	
	otor 2	Rebecca A.					An amended filing A supplement show	wing postpetition chapter the following date:
``							<u> </u>	
Unit	ed States Bank	ruptcy Court for the	: NORTH	IERN DISTRICT OF OHIO	<u> </u>		MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your						12/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this i n.				
Par		ribe Your House	ehold					
1.	Is this a joi ☐ No. Go to							
		o line 2. es Debtor 2 live	in a senar	ate household?				
	= 103. 50 0		пт и осриг	ate floadeffold.				
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.					_	☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	•	penses include		No				□ 162
		of people other to d your depende		Yes				
		nate Your Ongoi						
exp	imate your e enses as of olicable date.	a date after the l	our bankr bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed and the second se	orm as a su e <i>J</i> , check t	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
				government assistance it				
	ficial Form 10		u nave m	nuded it on <i>Scriedule I.</i> 1	our income		Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. In	nclude first mortgag	e 4. \$	\$	0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. S	\$	25.00
		erty, homeowner's	s, or renter	's insurance		4b.		134.00
				ıpkeep expenses		4c. \$		50.00
5.		eowner's associate mortgage payme		dominium dues our residence , such as ho	me equity loans	4d. \$ 5. \$	•	0.00
		3 3 ps.y	, .			'	•	2.00

Official Form 106J Schedule J: Your Expenses page 1

	i O. Ott			
or 2 Rebec	ca A. Ott	Case num	ber (if known)	
Utilities:				
	ity, heat, natural gas	6a.	\$	250.00
	sewer, garbage collection	6b.	\$	75.00
	one, cell phone, Internet, satellite, and cable services	6c.	\$	440.00
6d. Other.	Specify:	6d.	\$	0.00
	usekeeping supplies	7.	\$	866.66
	d children's education costs	8.	\$	0.00
Clothing, lau	ndry, and dry cleaning	9.	\$	100.00
-	e products and services	10.	\$	50.00
Medical and	dental expenses	11.	\$	300.00
Transportation	on. Include gas, maintenance, bus or train fare.			
	e car payments.	12.	*	375.00
Entertainmen	nt, clubs, recreation, newspapers, magazines, and books	13.	·	20.00
Charitable co	ontributions and religious donations	14.	\$	20.00
Insurance.				
	e insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	F0.00
15a. Life ins		15a.		50.00
15b. Health		15b.	· : ———	0.00
15c. Vehicle		15c.	·	53.00
	nsurance. Specify:	15d.	>	0.00
Specify:	t include taxes deducted from your pay or included in lines 4 or 20.	16.	¢	0.00
	r lease payments:		Ψ	0.00
	ments for Vehicle 1	17a.	\$	0.00
	ments for Vehicle 2	17b.	·	0.00
17c. Other.		17c.	·	0.00
17d. Other.		17d.	·	0.00
	its of alimony, maintenance, and support that you did not report a		·	
	m your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
Other payme	nts you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	operty expenses not included in lines 4 or 5 of this form or on Sch			
_	ges on other property	20a.		0.00
20b. Real es		20b.	·	0.00
•	y, homeowner's, or renter's insurance	20c.	· · · · · · · · · · · · · · · · · · ·	0.00
	nance, repair, and upkeep expenses	20d.	·	0.00
	wner's association or condominium dues	20e.	·	0.00
Other: Specif	y:	21.	_+\$	0.00
Calculate voi	ur monthly expenses			
•	s 4 through 21.		\$	2,808.66
	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,000.00
	22a and 22b. The result is your monthly expenses.		\$ ——	2 000 60
220. Add line	zza anu zzb. The result is your monthly expenses.		Φ	2,808.66
Calculate you	ur monthly net income.			
23a. Copy lii	ne 12 (your combined monthly income) from Schedule I.	23a.	\$	4,040.00
23b. Copy y	our monthly expenses from line 22c above.	23b.	-\$	2,808.66
				, , , , , ,
	et your monthly expenses from your monthly income.	00	•	4 224 24
The res	ult is your monthly net income.	23c.	\$	1,231.34
Do vou exne	ct an increase or decrease in your expenses within the year after y	ou file this	form?	
For example, do	you expect to finish paying for your car loan within the year or do you expect you			rease or decrease because of
	he terms of your mortgage?		•	
■ No.				

Fill in this inforr	mation to identify your	case:			
Debtor 1	Melvin O. Ott				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Rebecca A. Ott	Middle Name	Last Name		
(Spouse II, IIIIIg)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)					neck if this is an nended filing
f two married performance file this betaining money	eople are filing togethe	r, both are equally respor ile bankruptcy schedules n connection with a bank	Debtor's Scheonsible for supplying correct information or amended schedules. Making ruptcy case can result in fines	ormation. g a false statement, conce	
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out bankrup	tcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petitic Declaration, and Signatur	
	Ity of perjury, I declare e true and correct.	that I have read the sumi	nary and schedules filed with t	this declaration and	
X /s/ Mel	vin O. Ott		X /s/ Rebecca A. O	tt	
Melvin			Rebecca A. Ott		
Signatui	re of Debtor 1		Signature of Debtor	2	
Date \$	September 17, 2023		Date Septembe i	r 17, 2023	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Fill in this info	ormation to identify you	r case:			
Debtor 1	Melvin O. Ott				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	Rebecca A. Ott	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
Case number					
(if known)				_	Check if this is an mended filing
Official F					
Statemer	nt of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
number (if kno	wn). Answer every que	•		y additional pages, write you	ir name and case
1. What is ye	our current marital statu	ıs?			
■ Marri	ad				
_	narried				
2. During the	e last 3 years, have you	lived anywhere other than	where you live now?		
■ No					
_	List all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	, ,	,	·		Data - Dalitario
Debtor 1		Dates Debtor 1 lived there	Debtor 2 Prior Ad	aress:	Dates Debtor 2 lived there
				ity property state or territory	
states and term	ories include Arizona, Ca	iliomia, idano, Louisiana, Ne	vada, New Mexico, Puerto R	co, Texas, Washington and W	risconsin.)
■ No					
☐ Yes.	Make sure you fill out Scl	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2 Exp	lain the Sources of You	r Income			
Fill in the t	otal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
□ No					
Yes.	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	1 of current year until iled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$0.00
		☐ Operating a business		☐ Operating a business	

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: January 1 to December 31, 2	Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
For the calendar year before January 1 to December 31, 2	• wades commissions	\$0.00	■ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
0 ,	joint case and you have income the ross income from each source sepa		·	
. co u.c dotano				
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current ye he date you filed for bankru		\$16,200.00	Social Security	\$8,460.0
	Pension	\$11,700.00		
or last calendar year: January 1 to December 31, 2	Social Security	\$21,600.00	Social Security	\$11,280.0
	Pension	\$15,600.00		
		\$21,600.00	Social Security	\$11,280.0
or the calendar year before January 1 to December 31, 2				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Melvin O. O Rebecca A.			Case	e number (if known)		
			/e primarily consumer del d for bankruptcy, did you pa		ıl of \$600 or more?		
	■ No. □ Yes		or to whom you paid a total domestic support obligation uptcy case.				
	Creditor's Name an	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Insiders include your of which you are an o a business you opera alimony.	relatives; any general pa fficer, director, person in te as a sole proprietor. 1	cy, did you make a payme artners; relatives of any general control, or owner of 20% of 1 U.S.C. § 101. Include pay	eral partners; partne r more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
	☐ Yes. List all payr Insider's Name and	ments to an insider. Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			Jacob er payment	paid	still owe		pay
8.	insider? Include payments on No	you filed for bankrupted debts guaranteed or cos	cy, did you make any payı	ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
	Insider's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
Pa	rt 4: Identify Legal	Actions, Repossession	ns, and Foreclosures	, 31.31	2		
9.	Within 1 year before	you filed for bankrupte including personal injury ntract disputes.	cy, were you a party in an cases, small claims actions				
	Case title Case number		Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before Check all that apply a No. Go to line 11	and fill in the details below	cy, was any of your prope	rty repossessed, fo	oreclosed, garnis	hed, attached	I, seized, or levied?
	Creditor Name and	Address	Describe the Property		Date		Value of the property
			Explain what happened	I			property
 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from y accounts or refuse to make a payment because you owed a debt? ■ No □ Yes. Fill in the details. 					mounts from your		
	Creditor Name and	Address	Describe the action the	creditor took	Date a	action was	Amount
12.		you filed for bankrupt eiver, a custodian, or a	cy, was any of your prope nother official?	rty in the possessi	on of an assigned	e for the bene	fit of creditors, a

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

Debi		Melvin O. Ott Rebecca A. Ott		Case numbe	「 (if known)	
Part	5:	List Certain Gifts and Contributio	ns			
	– 1	n 2 years before you filed for bank No Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of more	than \$600 per person	?
		s with a total value of more than \$6 person	600	Describe the gifts	Dates you gave the gifts	Value
		on to Whom You Gave the Gift and ress:	d			
14.	– 1	n 2 years before you filed for bank No Yes. Fill in the details for each gift or		did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts more Char	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Co	total	Describe what you contributed	Dates you contributed	Value
Part	6:	List Certain Losses				
	or gal	mbling? No Yes. Fill in the details. cribe the property you lost and the loss occurred	Descr	r since you filed for bankruptcy, did you lose any ribe any insurance coverage for the loss e the amount that insurance has paid. List pending	Date of your loss	Value of property
Part	7:	List Certain Payments or Transfe		nce claims on line 33 of Schedule A/B: Property.		
	Withi consi	n 1 year before you filed for bankr ulted about seeking bankruptcy or	uptcy, d	lid you or anyone else acting on your behalf paying a bankruptcy petition? rs, or credit counseling agencies for services require	, ,	rty to anyone you
	_	No Yes. Fill in the details.				
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	1468 Suit	ser & Associates Co., L.P.A. 8 W. 9th St. e 300 veland, OH 44113		\$200.00	\$200.00 Retainer Fee Paid 8-9-2023.	\$200.00
	prom		editors o	lid you or anyone else acting on your behalf pay or to make payments to your creditors? ted on line 16.	or transfer any prope	rty to anyone who
	I	No				
		Yes. Fill in the details.				
	Pers Addı	on Who Was Paid ress		Description and value of any property transferred	Date payment or transfer was	Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

made

Official Form 107

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		payme	be any property or nts received or debts exchange	Date transfer was made	
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		y property to a	self-settled	l trust or similar device o	of which you are a	
	Name of trust	Description and v	alue of the prop	perty transf	ferred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	orage Units	s		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accour	nts; certificates	of deposit			
	■ No □ Yes. Fill in the details.						
		Last 4 digits of account number	Type of accou	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1	year before	e you filed for bankruptc	y?	
	NoYes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	or Someone Else					
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ude any propert	y you borre	owed from, are storing f	or, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value	
Par	t 10: Give Details About Environmental Info	rmation					
For	the purpose of Part 10, the following definition	ns apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Melvin O. Ott Debtor 2 Rebecca A. Ott

Case number (if known)

	regi	liations controlling the cleanup of these	substances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	II notices, releases, and proceedings the	at you know about, regardless of when	they occurred.					
24.	Has	any governmental unit notified you that	t you may be liable or potentially liable	under or in violation of an environm	ental law?				
	_								
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envir	onmental law? Include settlements	and orders.				
		No							
		Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pa	rt 11:	Give Details About Your Business or	,						
		= nin 4 years before you filed for bankrupt	-	of the following connections to an	v business?				
21.	VVILI	☐ A sole proprietor or self-employed i		_	y business:				
				· ·					
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.								
		", "	in the details below for each business.		_				
	Ad	siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security					
	(Nui	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed					
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement to	o anyone about your business? Incl	ude all financial				
		No							
		Yes. Fill in the details below.							
		me dress nber, Street, City, State and ZIP Code)	Date Issued						
		•							

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Part 12: Sign Below

Official Form 107

page 6

Debtor Debtor			Case number (if known)	
with a b			, concealing property, or obtaining money or property by fraud in connection or sometions are to 20 years, or both.	'n
/s/ Me	lvin O. Ott	/s/ Re	ebecca A. Ott	
Melvir	n O. Ott	Rebed	cca A. Ott	
Signat	ure of Debtor 1	Signat	ture of Debtor 2	
Date	September 17, 2023	Date	September 17, 2023	
Did you	ı attach additional pages to <i>Your Sta</i>	tement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No				
☐ Yes				
Did you	pay or agree to pay someone who is	s not an attorney to l	help you fill out bankruptcy forms?	
■ No				
☐ Yes.	Name of Person Attach the Ba	nkruptcy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this information to identify your case:						
Debtor 1	Melvin O. Ott					
Debtor 2 (Spouse, if filing)	Rebecca A. Ott					
United States Bankruptcy Court for the: Northern District of Ohio						
Case number (if known)						

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
3. The commitment period is 3 years.						
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 0.00 payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

				Column A Debtor 1		Column B Debtor 2 c		
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		fit under					
	For you		.00					
	For your spouse		.00					
9.	Pension or retirement income. Do not include any benefit under the Social Security Act. Also, except a not include any compensation, pension, pay, annuity United States Government in connection with a disability, or death of a member of the uniformed sepay paid under chapter 61 of title 10, then include the does not exceed the amount of retired pay to which if retired under any provision of title 10 other than chapter 61.	s stated in the next senter, or allowance paid by the bility, combat-related injurvices. If you received any lat pay only to the extent you would otherwise be expected.	ence, do le lry or y retired that it	\$1,	300.00	\$	0.00	
10.	Income from all other sources not listed above. Do not include any benefits received under the Soci received as a victim of a war crime, a crime against domestic terrorism; or compensation, pension, pay, United States Government in connection with a disability, or death of a member of the uniformed set sources on a separate page and put the total below.	al Security Act; payments humanity, or internationa annuity, or allowance pai bility, combat-related inju rvices. If necessary, list o	s I or d by the Iry or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total average monthly income. Adeach column. Then add the total for Column A to the		\$	1,300.00	+ \$	0.00	= \$	1,300.00
Part	2: Determine How to Measure Your Deduction	ons from Income						nthly income
	Copy your total average monthly income from lin Calculate the marital adjustment. Check one: You are not married. Fill in 0 below.	ne 11.					\$	1,300.00
	You are married and your spouse is filing with	vov. Fill in O holow						
	You are married and your spouse is not filling we Fill in the amount of the income listed in line 11 dependents, such as payment of the spouse's Below, specify the basis for excluding this incomadjustments on a separate page.	, ith you. , Column B, that was NO tax liability or the spouse' me and the amount of inc	s suppor	t of someon	e other th	an you or you	ır depend	ents.
	If this adjustment does not apply, enter 0 below	I.	¢					
			. Ψ \$		_			
			+\$					
	Total		\$	0.0	0 Co	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 f	rom line 12.					\$	1,300.00
15.	Calculate your current monthly income for the 115a. Copy line 14 here=>	•					\$	1,300.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2	Melvin O. Rebecca					
	Multiply I	line 15a by 12 (the number of months in	n a year).		x	12
1	5b. The resu	alt is your current monthly income for th	e year for this part of	the form	\$	15,600.00
16. Ca	lculate the m	nedian family income that applies to	you. Follow these ste	eps:		
16	a. Fill in the st	tate in which you live.	ОН			
16	b. Fill in the nu	umber of people in your household.	2			
	To find a lis	nedian family income for your state and st of applicable median income amount of or this form. This list may also be ava	s, go online using the		\$	76,131.00
17. Ho	w do the line	es compare?				
17		e 15b is less than or equal to line 16c. 0 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
17	132	e 15b is more than line 16c. On the top $25(b)(3)$. Go to Part 3 and fill out Calc ir current monthly income from line 14 a	ulation of Your Disp			
Part 3:	Calculate	e Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18. C o	py your total	average monthly income from line	 11 .		\$	1,300.00
19. De	educt the mar ntend that calc ouse's income	rital adjustment if it applies. If you are culating the commitment period under e, copy the amount from line 13. al adjustment does not apply, fill in 0 or	e married, your spous 11 U.S.C. § 1325(b)(4	e is not filing with you, and you	- \$	0.00
19	b. Subtract li	ne 19a from line 18.			\$	1,300.00
20. Ca	lculate your	current monthly income for the year	. Follow these steps:			
20	a. Copy line 1	9b			\$	1,300.00
	Multiply by	12 (the number of months in a year).			X	12
20	b. The result i	s your current monthly income for the y	ear for this part of the	e form	\$	15,600.00
20	c. Copy the m	nedian family income for your state and	size of household fro	m line 16c	\$	76,131.00
21	. How do the	e lines compare?				
		Ob is less than line 20c. Unless otherw I is 3 years. Go to Part 4.	ise ordered by the co	urt, on the top of page 1 of this form, ch	neck box 3, 7	he commitment
		Ob is more than or equal to line 20c. Unitment period is 5 years. Go to Part 4.	nless otherwise order	ed by the court, on the top of page 1 of	this form, ch	eck box 4, The
Part 4:	Sign Bel	ow				
Ву	signing here,	under penalty of perjury I declare that	the information on thi	s statement and in any attachments is	true and corr	ect.
X /s	s/ Melvin O.	Ott	Х	/s/ Rebecca A. Ott		
N	lelvin O. Ot	t		Rebecca A. Ott		
	ignature of De			Signature of Debtor 2		
Da	te Septemb MM / DD	oer 17, 2023 / YYYY		Date September 17, 2023 MM / DD / YYYY		
If y	ou checked 1	7a, do NOT fill out or file Form 122C-2				

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 3

Debtor 1	Melvin O. Ott		
Debtor 2	Rebecca A. Ott	Case number (if known)	
	·		

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	' :	Liquidation
\$2	245	filing fee
\$	78	administrative fee
+ \$	15	trustee surcharge
\$3	338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Ohio

In 1	Melvin O. Ott re Rebecca A. Ott		Case No					
	Rebecca A. Ott	Debtor(s)	Chapter	13				
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)				
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy	, or agreed to be pa	id to me, for services rendered or to)			
	For legal services, I have agreed to accept		\$	3,000.00				
	Prior to the filing of this statement I have received		\$	200.00				
	Balance Due			2,800.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are me	mbers and associates of my law fire	m.			
	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the narrows.							
5.	In return for the above-disclosed fee, I have agreed to re	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Exemption planning; assistance with evas needed. 	ement of affairs and plan which ors and confirmation hearing, a	h may be required; nd any adjourned h	earings thereof;				
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtor(s) in any d 522(f)(2)(A) for avoidance of liens on ho proceeding, negotiations with secured of amendments. The above fee does not in other chapter of the bankruptcy code.	lischargeability actions, ju usehold goods; relief fron creditors to reduce to mar	dicial lien avoidants stay actions or ket value of prop	any other adversary erty; redemptions, and				
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of any sbankruptcy proceeding.	y agreement or arrangement fo	r payment to me for	representation of the debtor(s) in				
	September 17, 2023	/s/ Nathan M. Nis	shiki					
_	Date	Nathan M. Nishil						
		Signature of Attorn Rauser & Assoc		: Co., L.P.A.				
		316 N. Michigan		,				
		Suite 420 Toledo, OH 4360	4					
		419-241-4900 Fa	ax: 419-241-4920					
		nnishiki@ohiole Name of law firm	galclinic.com					
		name of tuw firm						

United States Bankruptcy Court Northern District of Ohio

Melvin O. Ott

In re	Rebecca A. Ott		Case No.						
		Debtor(s)	Chapter	13					
	VERIFICATION OF CREDITOR MATRIX								
Γhe ab	ove-named Debtors hereby verify t	hat the attached list of creditors is true and co	orrect to the best	of their knowledge.					
Date:	September 17, 2023	/s/ Melvin O. Ott							
		Melvin O. Ott							
		Signature of Debtor							
Date:	September 17, 2023	/s/ Rebecca A. Ott							
		Rebecca A. Ott							
		Signature of Debtor							

Family Health Services of Erie Co 1912 Hayes Ave Sandusky, OH 44870

Firelands Health Services PO Box 2338 Sandusky, OH 44870

One Main Financial 5215 Monroe St. Suite 12 Toledo, OH 43623

Parkview Community 3800 Boardwalk Blvd Sandusky, OH 44870

Retina Associates of Cleveland 24075 Commerce Park Beachwood, OH 44122-5846

Revenue Group 3711 Chester Ave Cleveland, OH 44114

Stoneberry PO Box 2823 Monroe, WI 53566-8023

Tate & Kirlin Associates Inc 4800 Street Rd #170 Feasterville Trevose, PA 19053

U.S. Bank
P. O. Box 790408
Saint Louis, MO 63179-0408

University Hospital PO Box 772038 Detroit, MI 48277-2038